

**DECLARATION/  
POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION**

Attorney Docket Number: UOD-124US  
First Named Inventor: James Kolodzey

**COMPLETE IF KNOWN**

Application Number: 10/820,185  
Filing Date: April 7, 2004  
Art Unit:  
Examiner Name:

- ☐ Declaration Submitted With Initial Filing (37 CFR 1.63)  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)  
☐ Supplemental Declaration (37 CFR 1.67)

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TERAHERTZ FREQUENCY RADIATION SOURCES AND DETECTORS BASED ON GROUP IV MATERIALS AND METHOD OF MANUFACTURE

(Title of the Invention)

the specification of which

☐ is attached hereto

**OR**

☒ was filed on (MM/DD/YYYY) 04/07/04 as United States Application or PCT International Application Number 10/820,185

and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

# Declaration/Power Of Attorney for Utility or Design Patent Application

(continued)

I hereby appoint:

☒ **Practitioners at Customer Number 31344**
**OR**
☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Direct all correspondence to:

☒ Practitioners Customer Number listed above; **OR**
☐ Correspondence Address Below

Name: RatnerPrestia

Address: P.O. Bopx 1596

City: Wilmington

State: Delaware

Zip: 19899

Country: USA

Telephone: (302) 778-2500

Fax: (302) 778-2600

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:**
☐ A Petition has been filed for this unsigned inventor.

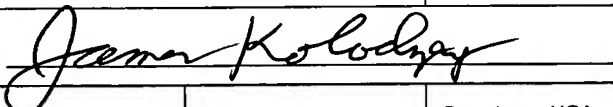
Given Name (first and middle (if any))

Family Name or Surname

James

Kolodzey

Inventor's Signature



Date:

5/13/04

Residence: City: Landenberg

State: PA

Country: USA

Citizenship: US

Mailing Address:

Mailing Address: 24 White Oak Road

City: Landenberg

State: PA

Zip: 19350

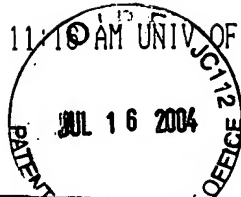
Country: USA

☒ Additional inventors are listed on the next page.

# Declaration/Power Of Attorney for Utility or Design Patent Application

(continued)

<b>Name of Second Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Samit Kumar		Ray	
Inventor's Signature <u><i>Samit Kumar</i></u>		Date: <u>05/07/04</u>	
Residence: City: IIT Kharagpur	State:	Country: India	Citizenship: India
Mailing Address:			
Mailing Address: Qr. No. B-92,			
City: IIT Kharagpur	State:	Zip: 721 302	Country: India
<b>Name of Third Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Thomas N.		Adam	
Inventor's Signature _____		Date: _____	
Residence: City: Poughkeepsie	State: NY	Country: USA	Citizenship: German
Mailing Address:			
Mailing Address: 44 Colburn Drive			
City: Poughkeepsie	State: NY	Zip: 12603	Country: USA
<b>Name of Fourth Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Pengcheng		Lv	
Inventor's Signature _____		Date: _____	
Residence: City: Newark	State: DE	Country: USA	Citizenship: China
Mailing Address:			
Mailing Address: 17 Marvin Drive, Apt. A7			
City: Newark	State: DE	Zip: 19713	Country: USA
<input checked="" type="checkbox"/> Additional inventors are listed on 1 Supplemental Sheet(s).			



UDD 634-15

PTO/SB/01. 02 &amp; 04 COMBINED (08-03) AW (10-03)

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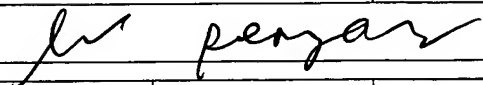
(continued)

<b>Name of Second Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Samit Kumar		Ray	
Inventor's Signature _____		Date: _____	
Residence: City: IIT Kharagpur	State:	Country: India	Citizenship: India
Mailing Address:			
Mailing Address: Qr. No. B-92,			
City: IIT Kharagpur	State:	Zip: 721 302	Country: India
<b>Name of Third Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Thomas N.		Adam	
Inventor's Signature <u>Thomas Adam</u>		Date: <u>5/4/04</u>	
Residence: City: Poughkeepsie	State: NY	Country: USA	Citizenship: German
Mailing Address:			
Mailing Address: 44 Colburn Drive			
City: Poughkeepsie	State: NY	Zip: 12603	Country: USA
<b>Name of Fourth Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Pengcheng		Lv	
Inventor's Signature _____		Date: _____	
Residence: City: Newark	State: DE	Country: USA	Citizenship: China
Mailing Address:			
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City: Newark	State: DE	Zip: 19713	Country: USA
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(continued)

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Given Name (first and middle (if any))		Family Name or Surname	
Samit Kumar		Ray	
Inventor's Signature _____		Date: _____	
Residence: City: IIT Kharagpur	State:	Country: India	Citizenship: India
Mailing Address:			
Mailing Address: Qr. No. B-92,			
City: IIT Kharagpur	State:	Zip: 721 302	Country: India
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Pengcheng		Lv	
Inventor's Signature 		Date: <u>5/13/04</u>	
Residence: City: Newark	State: DE	Country: USA	Citizenship: China
Mailing Address:			
Mailing Address: 17 Marvin Drive, Apt. A7			
City: Newark	State: DE	Zip: 19713	Country: USA
<input checked="" type="checkbox"/> Additional inventors are listed on 1 Supplemental Sheet(s).			




# DECLARATION/POWER OF ATTORNEY - SUPPLEMENTAL SHEET

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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Ralph Thomas		Troeger	
Inventor's Signature <u>Ralph Thomas Troeger</u>		Date: <u>5/14/04</u>	
Residence: City: Owings Mills	State: MD	Country: USA	Citizenship: German
Mailing Address:			
Mailing Address: 300 Garrison Forest Road			
City: Owings Mills	State: MD	Zip: 21117	Country: USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Miron S.		Kagan	
Inventor's Signature _____		Date: _____	
Residence: City: Moscow District	State:	Country: Russia	Citizenship: Russia
Mailing Address: 143-12 Oktyabr'sky Prospekt			
Mailing Address: 140000 Lyubertsy			
City: Moscow District	State:	Zip:	Country: Russia
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Irina N.		Yassievich	
Inventor's Signature _____		Date: _____	
Residence: City: St. Petersburg	State:	Country: Russia	Citizenship: Russia
Mailing Address:			
Mailing Address: Voznesensky pr. 34 ap. 6			
City: 190 068 St. Petersburg	State:	Zip:	Country: Russia

## DECLARATION/POWER OF ATTORNEY - SUPPLEMENTAL SHEET

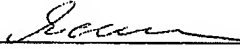
Page 4 of 5

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Ralph Thomas		Troeger	
Inventor's Signature _____		Date: _____	
Residence: City: Owings Mills	State: MD	Country: USA	Citizenship: German
Mailing Address: _____			
Mailing Address: 300 Garrison Forest Road			
City: Owings Mills	State: MD	Zip: 21117	Country: USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Miron S.		Kagan	
Inventor's Signature 		Date: 18.06.2004	
Residence: City: Moscow District	State: _____	Country: Russia	Citizenship: Russia
Mailing Address: 143-12 Oktyabr'sky Prospect			
Mailing Address: 140000 Lyubertsy			
City: Moscow District	State: _____	Zip: _____	Country: Russia
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Irina N.		Yassievich	
Inventor's Signature _____		Date: _____	
Residence: City: St. Petersburg	State: _____	Country: Russia	Citizenship: Russia
Mailing Address: _____			
Mailing Address: Voznesensky pr. 34 ap. 6			
City: 190 068 St. Petersburg	State: _____	Zip: _____	Country: Russia

AW (07-03)

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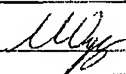
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Given Name (first and middle (if any))		Family Name or Surname	
Ralph Thomas		Troeger	
Inventor's Signature _____		Date: _____	
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Miron S.		Kagan	
Inventor's Signature _____		Date: _____	
Residence: City: Moscow District	State:	Country: Russia	Citizenship: Russia
Mailing Address: 143-12 Oktyabr'sky Prospect			
Mailing Address: 140000 Lyubertsy			
City: Moscow District	State:	Zip:	Country: Russia
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Irina N.		Yasslevich	
Inventor's Signature 		Date: June 11, 2004	
Residence: City: St. Petersburg	State:	Country: Russia	Citizenship: Russia
Mailing Address: _____			
Mailing Address: Voznesensky pr. 34 ap. 6			
City: 190 068 St. Petersburg	State:	Zip:	Country: Russia



AW (07-03)

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Page 5 of 5

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Maxim A.		Odnoblyudov	
Inventor's Signature 		Date: June 11, 2004	
Residence: City: St. Petersburg	State:	Country:	Citizenship: Russia
Mailing Address:			
Mailing Address: Kosmonavtov pr., 46-207			
City: 196233 St. Peterburg	State:	Zip:	Country: Russia
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature _____		Date: _____	
Residence: City:	State:	Country:	Citizenship:
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City:	State:	Zip:	Country:
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